Proposal to Amend IMCC Act, 1970

1863. SHRI RAJ NATH SINGH:
PROF. RAM KAPSE:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have under consideration a proposal to amend the IMCC Act, 1970 so as to include Naturopaths in the list of Government recognised medical practitioners; and

(b) if so, by when the Bill to amend the Act will be tabled in Parliament?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) and (b) The proposal to set up Statutory Bodies on the pattern of CCIM is under the active consideration of the Government.

Shortage of Medical Staff in Government Hospitals of Delhi

1864. SHRI O.P. KOHLI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Government hospitals, dispansaries and other health services at Delhi are suffering from a shortage of medical staff and nearly 200 medical officers posts have been lying vacant for over two years now; and

(b) if so, what action Government propose to take to fill up the medical posts lying vacant?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) At present about 200 Posts of Specialist/Medical officers are vacant in Delhi out of sanctioned posts of around 2650.

(b) Specialists Posts as well as Medical Officers Posts are filled up on the basis of recommendations of the Union Public Service Commission. Efforts are being made to fill up the Medical Posts from the candidates allocated to CHS, on the basis of Combined Medical Services Examinations, 1997, and candidates recommended for vacant sprecialist posts.

Pregnancy Related Deaths in Maharashtra

1865. MISS SAROJ KHAPARDE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) on an average how many women out of one lakh die due to child birth or pregnancy related causes in Maharashtra and how does it compare with other States;

(b) whether it is a fact that most of these deaths in the State are avoidable deaths; and

(c) if so, what remedial steps are being taken by Government in this regard?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) As per Survey of Causes of Death during 1991—94, Sample Registration System, Registrar General of India, the indirect estimates indicate that the maternal mortality rate (MMR) in Maharashtra at 307 per 1,00,000 population is higher than that of Kerala (102), Punjab (124) and Tamil Nadu (245); however it is much lower that many other states like Assam (1049), Bihar (762) and Madhya Pradesh (650).

(b) Most of the maternal deaths are due to haemorrhage [24%, anaemia (19%), toxaemia (15%), abortion (12%) and infection 8%], which are preventable through better Ante-Natal, Natal and Post-Natal Care.

(c) The Reproductive and Child Health (RCH) Programme launched in October 1997, by the Government seeks to integrate all interventions for fertility regulation, and Maternal and Child Health, and thus ensure promotion of sound reproductive health both for men and women. The Programme lays special stress on Maternal Health. It envisages upgrada-